

COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Novel combination of luteoprednol an $\beta 2$ adrenoceptor-agonists

The specification of which (check only one item below):

- ☐ is attached hereto.
- ☐ was filed as United States application
Number _____ on _____
and was amended _____ on _____ (if applicable).
- ☒ was filed as PCT international application
Number PCT/EP00/09392 on 25 September 2000
and was amended _____ on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§119 (a)-(d), 172 or 365 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §§119(a)-(d), 172 or 365:					
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. §§119, 172 or 365		
GERMANY	199 47 235.1	30 SEPTEMBER 1999	X	Yes	No
				Yes	No
				Yes	No
				Yes	No
				Yes	No

I hereby appoint the following attorneys and agent(s) to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in connection with international applications directed to said invention:

William L. Mathis	17,337	Eric H. Weisbait	30,505	Bruce T. Wieder	33,815
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James A. LaBarre	28,632	Michael G. Savage	32,596		
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and:

Address all correspondence to:



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P.O. Box 1404
Alexandria, Virginia 22313-1404

Address all telephone calls to: Teresa Stanek Rea (703) 836-6620.

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FULL NAME OF SOLE OR FIRST INVENTOR	<u>Istvan SZELENYI</u>
Signature	<i>[Signature]</i>
Date	<u>05/22/02</u>
Residence (City, State, Country)	<u>Schwaig, DEUTSCHLAND</u>
Citizenship	<u>GERMANY</u>
Mailing Address	<u>Haendelstrasse 32, 90571 Schwaig, DEUTSCHLAND</u>
City, State, ZIP, Country	<u>90571 Schwaig, DEUTSCHLAND</u>
FULL NAME SECOND INVENTOR, IF ANY	<u>Hildegard KUSS</u>
Signature	<i>[Signature]</i>
Date	<u>05/22/02</u>
Residence (City, State, Country)	<u>Dresden, DEUTSCHLAND</u>
Citizenship	<u>GERMANY</u>
Mailing Address	<u>Kieler Strasse 6, 01109 Dresden, DEUTSCHLAND</u>
City, State, ZIP, Country	<u>01109 Dresden, DEUTSCHLAND</u>

FULL NAME THIRD INVENTOR, IF ANY	<u>Sabine HEER</u>
Signature	X
Date	X
Residence (City, State, Country)	<u>Radebeul, DEUTSCHLAND</u> DEX
Citizenship	<u>GERMANY</u>
Mailing Address	<u>Lindenauer Strasse 13, 01445 Radebeul, DEUTSCHLAND</u>
City, State, ZIP, Country	<u>01445 Radebeul, DEUTSCHLAND</u>
FULL NAME FOURTH INVENTOR, IF ANY	<u>Juergen ENGEL</u>
Signature	X
Date	X
Residence (City, State, Country)	<u>Alzenau, DEUTSCHLAND</u> DEX
Citizenship	<u>GERMANY</u>
Mailing Address	<u>Erlenweg 3, 63755 Alzenau, DEUTSCHLAND</u>
City, State, ZIP, Country	<u>63755 Alzenau, DEUTSCHLAND</u>
FULL NAME FIFTH INVENTOR, IF ANY	
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SIXTH INVENTOR, IF ANY	
Signature	
Date	
Residence (City, State, Country)	
Citizenship	
Mailing Address	
City, State, ZIP, Country	
FULL NAME SEVENTH INVENTOR, IF ANY	
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Signature	X
Date	X
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FULL NAME SECOND INVENTOR, IF ANY	Hildegard KUSS
Signature	<i>Hildegard Kuss</i>
Date	27.05.02
Residence (City, State, Country)	Dresden, DEUTSCHLAND
Citizenship	GERMANY
Mailing Address	Kieler Strasse 6, 01109 Dresden, DEUTSCHLAND
City, State, ZIP, Country	01109 Dresden, DEUTSCHLAND

FULL NAME THIRD INVENTOR, IF ANY	Sabine HEER
Signature	X
Date	X
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Citizenship	GERMANY
Mailing Address	Lindenauer Strasse 13, 01445 Radebeul, DEUTSCHLAND
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FULL NAME FOURTH INVENTOR, IF ANY	Juergen ENGEL
Signature	X
Date	X
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Citizenship	GERMANY
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FULL NAME THIRD INVENTOR, IF ANY	Sabine HEER
Signature	<i>X Sabine Heer</i>
Date	<i>X 10.06.2002</i>
Residence (City, State, Country)	Radebeul, DEUTSCHLAND
Citizenship	GERMANY
Mailing Address	Lindenauer Strasse 13, 01445 Radebeul, DEUTSCHLAND
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Signature	<i>X</i>
Date	<i>X</i>
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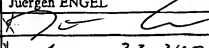
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City, State, ZIP, Country	01445 Radebeul, DEUTSCHLAND
FULL NAME FOURTH INVENTOR, IF ANY	Juergen ENGEL
Signature	
Date	May 23, 2002
Residence (City, State, Country)	Alzenau, DEUTSCHLAND
Citizenship	GERMANY
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